TEE(O) IIVAIJOIMII IAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Accordance 1450
Acc

(571) 273-2885 or Fax

appropriate. All further con	rm should be used for tran rrespondence including the l below or directed otherwise ns.	Patent, advance or	ders and notificatio	n of maintenance fees	will be mailed to the	current correspon	ndence address as
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 22850 7590 08/25/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
OIPE 4 CUSTOMER NUMBER				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
NOV 0 2 2005 (22850				***		(Depositor's name)
22000				(Signature)			
			,		***		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVE	NTOP	ATTORNEY DOCKET	TNO CONE	RMATION NO.
10/799,876							
	•	Masayuki Nakamoto 250291US2SRD 8344 CONTINUATION					
ITTLE OF INVENTION: F	IELD EMISSION COLD CA	THODE DEVICE	OF LATERAL TY	PE			
							•
A DDI NI TWOS	CMALL ENTETY	100112 2		NIDLIGATION FEE	T TOTAL PROOF D		
APPLN. TYPE				PUBLICATION FEE	TOTAL FEE(S) DU		ATE DUE
nonprovisional NO		\$1400		\$300	\$1700	1	1/25/2005
EXAMINER AR			IT (CLASS-SUBCLASS]		:
GUHARAY, KARABI			9 313-311000		_		:
	e address or indication of "Fe	ee Address" (37	2. For printing of	the patent front page, l	ist	ODLON ODIVA	
CFR 1.763). Change of correspondence address (or Change of Correspondence			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a 2 MCGLELLAND, MAIEH				
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	tion (or "Fee Address" Indica or more recent) attached. Use	tion form of a Customer	registered attorney of agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 8 NEUSTADT, P.C.				
	RESIDENCE DATA TO B		•	• · ·			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be a 37 CFR 3.11. Completion of						*
(A) NAME OF ASSIGN	EE	B) RESIDENCE: (CITY and STATE OR COUNTRYS)YENE2 00000128 10799876					
KABUSHIKI KAISHA TOSHIBA			Tokyo, Japan C:1501 1409.00 OP 02 FC:1504 300.00 OP				
Please check the appropriate	e assignee category or categor	ries (will not be pr	inted on the patent)	Individual 🖾 C	Corporation or other pri	vate group entity	Government
4a. The following fee(s) are	enclosed:	4b	. Payment of Fee(s)				
Issue Fee		A check in the amount of the fee(s) is enclosed.					
Publication Fee (No small entity discount permitted) Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of	Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).					
	(from status indicated above	•	_		***	•	
	MALL ENTITY status. See			o longer claiming SMA			
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issu ublication Fee (if required) words of the United States Pate	e Fee and Publicate vill not be accepted and Trademark	tion Fee (if any) or t I from anyone other Office.	o re-apply any previous than the applicant; a reg	ly paid issue fee to the distered attorney or age	application ident nt; or the assigne	ified above. e or other party in
Authorized Signature	Joseph Scafe	the fr.		Date	NOV O	2 2005	:
Typed or printed name	/Joseph Scafetta,			Registration			<u> </u>
This collection of informatic an application. Confidential submitting the completed ap this form and/or suggestions	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. oplication form to the USPT of for reducing this burden, sh	11. The informatio 122 and 37 CFR D. Time will vary ould be sent to the	n is required to obta 1.14. This collection depending upon the Chief Information	in or retain a benefit by is estimated to take 12 individual case. Any c Officer, U.S. Patent and	the public which is to minutes to complete, i omments on the amou Trademark Office, U.	file (and by the Uncluding gathering to firme you re S. Department o	SPTO to process) ag, preparing, and quire to complete f Commerce, P.O.

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.